ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):	
Stephen E. Cohen, State Bar No. 284416	FOR COURT USE ONLY
THE CHANLER GROUP	
2560 Ninth Street, Parker Plaza, Suite 214	ENROPORT
Berkeley, CA 94710	ENDORSED
TELEPHONE NO. (510) 848-8880 FAX NO. (Optional): (510) 848-8118	FILED
E-MAIL ADDRESS (Optional): Stephen (a) chanler.com	ALAMEDA COUNTY
ATTORNEY FOR (Name) Plaintiff, Laurence Vinocur	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF Alameda	AUG 1 2 2014
STREET ADDRESS: 1221 Oak Street	2011
MAILING ADDRESS:	CLERK OF THE SUPERIOR COURT
CITY AND ZIP CODE: Oakland 94612	By MINAY PORUTO
BRANCH NAME, Administration Building	the state of the s
PLAINTIFF/PETITIONER: Laurence Vinocur	Deputy
DEFENDANT/RESPONDENT: InMusic Brands, Inc., et al.	
REQUEST FOR DISMISSAL	CASE NUMBER:
Personal Injury, Property Damage, or Wrongful Death	RG14725559
Motor Vehicle Other	1.5
Family Law Eminent Domain	
Other (specify): Health and Safety Code § 25249.6 et seq. (Prop 65)	
- A conformed copy will not be returned by the clerk unless a method of return	is provided with the document
- A comormed copy will not be returned by the clerk diffess a method of return	in brasinam stort ma manuscription
1. TO THE CLERK: Please dismiss this action as follows:	
a. (1) With prejudice (2) Vithout prejudice	
b. (1) Complaint (2) Petition	an (data):
(3) Cross-complaint filed by (name):	on (date):
(4) Cross-complaint filed by (name):	on (date):
(5) Entire action of all parties and all causes of action	
· ·	
(6) Other (specify):*	
2. (Complete in all cases except family law cases.)	8
Court fees and costs were waived for a party in this case. (This information m	lay he obtained from the clark. If this how is
	ay be obtained from the deta. If this box is
checked, the declaration on the back of this form must be completed)	
Date: August 12, 2014	
Christopher M. Martin	
(TYPE OR PRINT NAME OF  ATTORNEY PARTY WITHOUT ATTORNEY)	(SIGNATURE)
"If dismissal requested is of specified parties only of specified causes of action Attorney or party witho	ut attorney for:
only, or of specified cross-complaints only, so state and identify the parties, causes of action, or cross-complaints to be dismissed.	
Cross-Complaints to be dismissed.	<u> </u>
	TIMEN
3. TO THE CLERK: Consent to the above dismissal is hereby given.**	
Date:	
<b>)</b>	
(TYPE OR PRINT NAME OF ATTORNEY PARTY WITHOUT ATTORNEY)	(SIGNATURE)
Attornov or party witho	ut attornev for:
relief – is on file, the attorney for cross-complainant (respondent) must	<u>-</u>
sign this consent if required by Code of Civil Procedure section 581 (i)	
or (i). Cross-Complai	mant
(To be completed by clerk) AUG 1 2 2014	
4. Dismissal entered as requested on (date):	
5 Dismissal entered on (date): as to only (name):	
6. Dismissal <b>not entered</b> as requested for the following reasons (specify):	
2	
7 a. Attorney or party without attorney notified on (date):	
b. Attorney or party without attorney notified on (date):  b. Attorney or party without attorney not notified. Filing party failed to provide	
	and the same same same
	TUUN KUNUD
Date: Clerk, by	Deputy

	017-110
PLAINTIFF/PETITIONER: Laurence Vinocur	CASE NUMBER:
DEFENDANT/RESPONDENT: InMusic Brands, Inc., et al.	RG14725559

## **Declaration Concerning Waived Court Fees**

	The court has a statutory lien for waived fees and costs on any recovery of \$10,000 or more in value by settlement, compromise, arbitration award, mediation settlement, or other recovery. The court's lien must be paid before the court will dismiss the case.	
1.	The court waived fees and costs in this action for (name):	
2.	The person in item 1 (check one):	
	a. is not recovering anything of value by this action.	
	b. is recovering less than \$10,000 in value by this action.	
	c. is recovering \$10,000 or more in value by this action. (If item 2c is checked, item 3 must be completed)	ted.)
3,	All court fees and costs that were waived in this action have been paid to the court (check one): Ye	s No
I decl	are under penalty of perjury under the laws of the State of California that the information above is true and corr	ect.
Date:		
		ě
(TYPE	OR PRINT NAME OF ATTORNEY PARTY MAKING DECLARATION) (SIGNATURE)	

## 1 I am over 18 years of age and not a party to this action. I am employed in the county where the 2 mailing took place. My business address is 2560 Ninth Street, Parker Plaza, Suite 214, Berkeley, 3 California 94710-2565. 4 On August 12, 2014, I caused to be served the following document(s), described as, 5 REQUEST FOR DISMISSAL 6 on each interested party as follows: 7 8 P. Mark Mahoney (Dorel U.S.A., Inc.) Jack O'Donnell One Market, Suite 3200 Numark International, Inc. 9 San Francisco CA, 94105 200 Scenic View Drive Cumberland, RI 02864 10 Jack O'Donnell Jack O'Donnell ION Audio, LLC 11 InMusic Brands, Inc. 200 Scenic View Drive 200 Scenic View Drive Cumberland, RI 02864 12 Cumberland, RI 02864 13 XXXXX (BY MAIL) I placed a true and correct copy of the foregoing document(s) in a sealed envelope addressed to each interested party as set forth above. I placed each such envelope, 14 with postage thereon fully prepaid, for collection and mailing at The Chanler Group, located in Berkeley, California. I am readily familiar with The Chanler Group's practice for collection and 15 processing of documents for mailing with the United States Postal Service. Under that practice, the documents are deposited with the United States Postal Service on the same day in the ordinary 16 course of business. 17 Executed this 12<sup>th</sup> day of August, 2014, at Berkeley, California. I declare under the penalty of perjury under the laws of the State of California that the foregoing is true and correct. 18 19 20 21 22 23 24 25 26 27

PROOF OF SERVICE

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